

APPLICATION DATA SHEET

APPLICATION INFORMATION

Filing Date:: **03/26/04**
Application Type:: **Regular**
Subject Matter:: **Utility**
CD-ROM or CD-R?:: **None**
Title:: **MEMORY DEVICE WITH INCREASED
DATA THROUGHPUT**

Attorney Docket Number:: **CD03191**
Request for Non-Publication?:: **Yes**
Suggested Drawing Figure:: **FIG. 2A**
Total Drawing Sheets:: **7**
Small Entity?:: **No**

APPLICANT INFORMATION

Applicant Authority Type::	Inventor
Primary Citizenship Country::	India
Status::	Full Capacity
Given Name::	Rajesh
Family Name::	Manapat
City of Residence::	San Jose
State or Province of Residence::	CA
Country of Residence::	US
Street of Mailing Address::	3081 Balmoral Drive
City of Mailing Address::	San Jose
State or Province of Mailing Address::	CA
Country of Mailing Address::	US
Postal or ZIP Code of Mailing Address::	95132

Applicant Authority Type::	Inventor
Primary Citizenship Country::	India
Status::	Full Capacity
Given Name::	Ritesh
Family Name::	Mastipuram
City of Residence::	Santa Clara
State or Province of Residence::	CA
Country of Residence::	US
Street of Mailing Address::	2291 Deborah Drive, #3
City of Mailing Address::	Santa Clara
State or Province of Mailing Address::	CA
Country of Mailing Address::	US
Postal or ZIP Code of Mailing Address::	95050

Applicant Authority Type::	Inventor
Primary Citizenship Country::	India
Status::	Full Capacity
Given Name::	Kannan
Family Name::	Srinivasagam
City of Residence::	Sunnyvale
State or Province of Residence::	CA
Country of Residence::	US
Street of Mailing Address::	555 E. Washington Avenue
	Apt. #1804
City of Mailing Address::	Sunnyvale
State or Province of Mailing Address::	CA
Country of Mailing Address::	US
Postal or ZIP Code of Mailing Address::	94086

CORRESPONDENCE INFORMATION

Name:: **WALKER & SAKO, LLP**
Street of Mailing Address:: **300 South First Street, Suite 235**
City of Mailing Address:: **San Jose**
State or Province of Mailing Address:: **CA**
Country of Mailing Address:: **US**
Postal or ZIP Code of Mailing Address:: **95113**
Phone Number:: **(408) 289-5315**
Fax Number:: **(408) 977-0174**
E-Mail Address:: **bsako@walkersako.com**

REPRESENTATIVE INFORMATION

Representative Designation::	Registration Number::	Representative Name::
Primary	37923	Bradley T. Sako

ASSIGNEE INFORMATION

Assignee Name:: **Cypress Semiconductor Corporation**
Street of Mailing Address:: **3901 North First Street**
City of Mailing Address:: **San Jose**
State or Province of Mailing Address:: **CA**
Country of Mailing Address:: **US**
Postal or ZIP Code of Mailing Address:: **95134**